

| POSITION            | INITIALS   | ID NO. | DATE     |
|---------------------|------------|--------|----------|
| FEE DETERMINATION   | <i>AS</i>  |        | 12/02/99 |
| O.I.P.E. CLASSIFIER |            |        | 12/9/99  |
| FORMALITY REVIEW    | <i>SSS</i> | 68971  | 12/30/99 |

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INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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